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OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

| Attorney Docket No. | | 01-608 | | | | |
|---------------------|------------------|-------------------|----------------|--|--|--|
| First In | ventor or Applic | cation Identifier | MATSUMOTO | | | |
| Title | PORTABLE | TRANSMITTE | R FOR REMOTELY | | | |

(Only for new nonprovisional applications under 37 C.F.R.§ 1.53(b))

| itle | | G VEHICULAR DEVICES | | |
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| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | | | | Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, VA 22313-1450 | | | | | | | | |
|---|---|-----------------|------------|--|---|----|----------|--------|------|--------|-----------------------|------|--|
| 1. X 2. X | * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. X Specification [Total Pages 17] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention | | | | Microfiche Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies | | | | | | | 71. | |
| <u>"N</u> C | Statement (IDS)/PTO-1449 Citations | | | | | | | 1, | | | | | |
| | 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) Of prior application No: Prior application information: Examiner Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | | | | | | |
| ⊠ Cus | stomer N | lumber or Bar C | Code Label | | DRRESPONDE 234 ustomer No. or At | 00 | | | or 🛘 | Corres | pondence address belo | ow . | |
| Name | lame | | | | | | | | | | | | |
| Address City State | | | | | | | Zip Code | | | | | | |
| Country | | (Print/hype) | | | Telephone | | | 7-9110 | Fax | 1,110 | 03) 707-9112 | | |
| | Name (Print/type) DAVID G. POSZ Registration No. (Attorney/Agent) 37,701 Signature Date April 1, 2004 | | | | | | | | | | | | |

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April 1, 2004

Date

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| FEE | TR | AN | SMI | TT | AL |
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| f | or | FY | 200 | 4 | |

| Effective 10/01/2003. Patent fees are st | ubject | to annual r | evision. |
|--|--------|-------------|----------|
| Applicant Claims small entity sta | itus. | See 37 | CFR 1.27 |
| TOTAL AMOUNT OF PAYMENT | (\$) | 810 | |

Signature

| required to respond to a con | ection of information unless it displays a valid Civib control number |
|------------------------------|---|
| | Complete if Known |
| Application Number | |
| Filing Date | April 1, 2004 |
| First Named Inventor | MATSUMOTO |
| Examiner Name | |
| Art Unit | |
| Attorney Docket No. | 01-608 |

| METHOD OF PAYMENT (check all that apply) | FEE CALCULATION (continued) | | | | | | | |
|---|-----------------------------|-----------------------------|--------------|-------------|---|-------------------|--|--|
| X Check Credit card Money Other None | | ADDITIO le Entity | | Entity | | | | |
| Deposit Account | Code | (\$) | Code | Fee (\$) | Fee Description | | Fee Paid | |
| Deposit Account Number 50-1147 | 1051 | 130 | 2051 | 65 | Surcharge – late filing | fee or oath | | |
| Deposit Account Name POSZ & BETHARDS, PLC | 1052 | 50 | 2052 | 25 | Surcharge – late provi | sional filing fee | or | |
| The Commissioner is authorized to: (check all that apply) | 1053 | 130 | 1053 | 130 | Non-English specificat | ion | | |
| Charge fee(s) indicated below Credit any overpayments | 1812 | 2,520 | 1812 | 2,520 | For filing a request for | ex parte reexam | nination | |
| X Charge any additional fee(s) during the pendency of this application | 1804 | 920* | 1804 | 920* | Requesting publication Examiner action | of SIR prior to | | |
| Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account. | 1805 | 5 1,840* | 1805 | 1,840* | Requesting publication Examiner action | | | |
| FEE CALCULATION | 1251 | 110 | 2251 | 55 | Extension for reply wit | | | |
| 1. BASIC FILING FEE | 1252 | 420 | 2252 | 210 | Extension for reply wit | hin second mon | th | |
| Large Entity Small Entity | 1253 | 950 | 2253 | 475 | Extension for reply wit | hin third month | | |
| Fee Fee Fee Fee Description | 1254 | 1,480 | 2254 | 740 | Extension for reply wit | hin fourth month | , | |
| Code (\$) Code (\$) Fee Paid 1001 770 2001 385 Utility filing fee 770 | 1255 | | 2255 | 1005 | Extension for reply wit | | · | |
| 1002 340 2002 170 Design filing fee | 1401 | • | 2401 | 165 | , | | | |
| 1003 530 2003 265 Plant filing fee | 1402 | 330 | 2402 | 165 | | | | |
| 1004 770 2004 385 Reissue filing fee | 1403 | | 2403 | 145 | | | | |
| 1005 160 2005 80 Provisional filing fee | 1451 | 1,510 | 1451 | 1,510 | · · · · · · · · · · · · · · · · · · · | | | |
| 1003 100 2003 00 Provisional miling fee | 1452 | | 2452 | 55 | Petition to revive – una | - | | |
| SUBTOTAL (1) (\$) 770 | 1453 | | 2453 | 665 | Petition to revive – uni | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | • | 2501 | 665 | Utility issue fee (or reis | | | |
| Fee from | 1502 | • | 2502 | 240 | Design issue fee | , | | |
| Total Claims 6 -20**= 0 × 18 = | 1503 | | 2503 | 320 | Plant issue fee | | | |
| Independent Claims 1 - 3"= 0 × 86 = | 1460 | | 1460 | 130 | Petitions to the Comm | issioner | | |
| Multiple Dependent | 1807 | | 1807 | 50 | Processing fee under | | | |
| | 1 | | 1 | | • | | | |
| Large Entity Small Entity Fee Fee | 1806 802 | | 1806 8021 | 180 40 | Submission of Informa Recording each paten | | <u> </u> | |
| Code (\$) Code (\$) | 1809 | | 2809 | 385 | property (times number Filing a submission aft | of properties) | 40 | |
| 1201 86 2201 43 Independent claims in excess of 3 | 1810 | 770 | 2810 | 385 | (37 CFR § 1.129(a)) For each additional inv | | | |
| 1203 290 2203 145 Multiple dependent claim, if not paid | 180 | | 2801 | 385 | examined (37 CFR § 1.129(b)) | | | |
| 1204 86 2204 43 **Reissue independent claims | 180 | - | 1802 | 900 | Request for expedited | • | E) — | |
| over original patent | 100. | - 500 | 1 .002 | 500 | of a design application | ı | | |
| 1205 18 2205 9 Reissue claims in excess of 20 and over original patent | | | | | | | | |
| SUBTOTAL (2) (\$) 0 | Othe | er fee (spe | cify) | | | | | |
| ** or number previously paid, if greater; For Reissues, see above | *Red | uced by Bas | sic Filing | Fee Paid | SUBTOT | AL (3) | (\$) 40 | |
| SUBMITTED BY | | | | | | Complete (if | | |
| Name (Print/Type) DAVID G. POSZ | | Registration Attorney/Ag | | 37,7 | 01 | Telephone | (703) 707-9110 | |

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.